

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TL	902	02/28/0
RESPONSE FORMALITY REVIEW	ng	JC906	06/13/01

### INDEX OF CLAIMS

☒ ..... Rejected  
☐ ..... Allowed  
☐ (Through numeral) ..... Canceled  
☐ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
Shifter	
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Amended	
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Claim	Date
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If more than 150 claims or 10 actions  
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